



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2518

|   |   |                                  |   |   |
|---|---|----------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>10/521,556  | <b>FILING OR 371(c) DATE</b><br>01/23/2006<br><b>RULE</b>   | <b>CLASS</b><br>123              | <b>GROUP ART UNIT</b><br>3748   | <b>ATTORNEY DOCKET NO.</b><br>77670/597 |
| <b>APPLICANTS</b><br>Takashi Tsunooka, Shizuoka, JAPAN;<br>Keizo Hiraku, Aichi, JAPAN;<br>Yukihiro Nakasaka, Shizuoka, JAPAN;<br>Akira Hashizume, Kanagawa, JAPAN;<br>Hiroshi Kanai, Shizuoka, JAPAN;<br>Naohide Fuwa, Aichi, JAPAN;<br>Tomoyuki Kaga, Shizuoka, JAPAN; |   |                                  |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP04/06202 04/28/2004 ✓   |   |                                  |   |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2003-146101 05/23/2003 ✓<br>JAPAN 2003-418590 12/16/2003 ✓  |   |                                  |   |   |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance                        |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>13   | <b>TOTAL CLAIMS</b><br>13               |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____  |   | <b>INDEPENDENT CLAIMS</b><br>17  |   |   |
| <b>ADDRESS</b><br>23838   |   |                                  |   |   |
| <b>TITLE</b><br>Control device for multicylinder internal combustion engine   |   |                                  |   |   |
| <b>FILING FEE RECEIVED</b><br>1870  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |